

**Description:**

PHYSICAL HEALTH SERVICES are delivered through contracts with the Public Health Districts and other providers. Program areas include: immunizations, chronic and communicable disease prevention and intervention, food safety, reduction of health risks from environmental exposures, promotion of maternal and child health, improving access to rural health care, and vital records. EMERGENCY MEDICAL SERVICES conducts ambulance licensing, certification and recertification to EMS personnel, operates the statewide EMS communications center, and provides technical assistance and grants to community EMS units, evaluation of EMS system performance, and other related activities. LABORATORY SERVICES is one of several basic support systems administered by the Division of Health for a variety of physical health programs, environmental control programs, and other divisions and programs of the Department. In addition, The Bureau of Laboratories provides laboratory support to the District Health Departments and other departments of state government in accordance with written agreements.

**Major Functions and Targeted Performance Standard(s) for Each Function:**

1. Empower Idahoans to make healthful decisions.
  - A. Increase the percentage of children who have received the basic immunizations series by age 24 months.

Actual Results			
1996	1997	1998	1999
			Initiated FY99
Projected Results			
2000	2001	2002	2003
90%	90%	90%	90%

- B. Increase the number of women who secure prenatal care in the first trimester of their pregnancy.

Actual Results			
1996	1997	1998	1999
			Initiated FY99
Projected Results			
2000	2001	2002	2003
90%	90%	90%	90%

**Program Results and Effect:**

Vaccine-preventable disease: The percent of fully immunized children under the age of three has risen from 51.3% to 79%.

Prenatal health care: The percent of women receiving care in the first trimester has remained fairly constant over the past three years at 78.6% - 78.8%.

For more information contact Richard Dohner at 334-6652.

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## Health & Welfare, Department of

### Self-Reliance Programs

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#### Description:

The Self-Reliance program administers Temporary Assistance to Families in Idaho (TAFI), Child Support, Child Care, Food Stamps and various community based grant programs. TAFI is a time-limited cash assistance and work service program with an emphasis on self-reliance and personal responsibility. The Self-Reliance program also operates the Idaho Child Care Program (ICCP), Aid to the Aged, Blind and Disabled, Food Stamps, Refugee Medical Assistance. Self-Reliance is also responsible for the eligibility determinations in these programs and in the Medicaid program. The Self-Reliance Program also designs and implements other supportive services to help families and individuals move to great self-reliance. Community based programs include the Community Service Block Grant, Low Income Energy Assistance, Low Income Weatherization Assistance, Emergency Food Assistance and the Telephone Assistance Program. The Child Support program is responsible for establishing and enforcing child support orders and medical support orders, modifying child support orders to ensure that support awards remain comparable to changes in parental income, and collecting child support for TAFI cases, non-TAFI cases and foster care cases. These collections are passed on to custodial parents or are used to reimburse the state and federal government for TAFI and foster care expenditures.

#### Major Functions and Targeted Performance Standard(s) for Each Function:

1. Strengthen the self-reliance of individuals and families.

- A. Increase the percentage of TAFI participants who are currently engaged in work activities for 20 or more hours per week.

Actual Results			
1996	1997	1998	1999
			55.93%
Projected Results			
2000	2001	2002	2003
100%	100%	100%	100%

- B. Increase the percentage of TAFI participants who become employed as a result of employment related activities.

Actual Results			
1996	1997	1998	1999
			27.37%
Projected Results			
2000	2001	2002	2003
50%	60%	65%	70%

- C. Increase the percentage of persons at risk of receiving TAFI benefits who become employed as a result of participating in employment related activities.

Actual Results			
1996	1997	1998	1999
			41.96%
Projected Results			
2000	2001	2002	2003
50%	60%	65%	70%

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**Health & Welfare, Department of  
Self-Reliance Programs**

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- D. Increase the percentage of non-custodial parents referred for employment related services who become employed.

Actual Results			
1996	1997	1998	1999
			0%
Projected Results			
2000	2001	2002	2003
10%	20%	30%	40%

- E. Increase the number of child support enforcement cases for which collections have been made on arrearages.

Actual Results			
1996	1997	1998	1999
			25.49%
Projected Results			
2000	2001	2002	2003
30%	35%	40%	45%

- F. Decrease the percentage of parents with child support arrearages.

Actual Results			
1996	1997	1998	1999
			57.74%
Projected Results			
2000	2001	2002	2003
55%	50%	45%	40%

- G. Increase the number of individuals who have child care available.

Actual Results			
1996	1997	1998	1999
			3.83
Projected Results			
2000	2001	2002	2003
1	1	1	1

**Program Results and Effect:**

The implementation of Welfare Reform changes should result in more participants working, fewer participants receiving cash assistance, reduction in the average length of time spent on cash assistance, more emphasis on child support payment collection and paternity establishment, and more utilization of the Idaho Child Care Program.

For more information contact Richard Dohner at 334-6652.

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## Health & Welfare, Department of Medical Assistance Services

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### Description:

Responsibilities of this program include administering plans to finance and deliver health services for people at risk due to low income and other factors, such as youth, old age, pregnancy, or disability, pursuant to state and federal Medicaid requirements. Additional responsibilities involve licensing and certification of health facilities to meet state and federal requirements and to participate in Medicaid and Medicare.

### Major Functions and Targeted Performance Standard(s) for Each Function:

1. Promote independence, dignity, self-reliance and a choice among safe and healthful environments for vulnerable adults.
  - A. Increase the percentage of vulnerable adults eligible for long-term care services who are in non-institutional settings.

Actual Results			
1996	1997	1998	1999
			33.69%
Projected Results			
2000	2001	2002	2003
38%	40%	42%	44%

- B. Increase the percentage of nursing facilities providing the standard of care reflected in the L. Jean Schoonover Excellence in Caring Award.

Actual Results			
1996	1997	1998	1999
			14.86%
Projected Results			
2000	2001	2002	2003
16%	17%	18%	19%

- C. Reduce the rate of deficiencies cited in adult care facilities surveyed by the Department of Health and Welfare.

Actual Results			
1996	1997	1998	1999
			10.29
Projected Results			
2000	2001	2002	2003
9.47	8.64	7.82	7.00

2. Empower Idahoans to make healthful decisions.
  - A. Increase the percentage of Medicaid households which receive a health self-care handbook.

Actual Results			
1996	1997	1998	1999
			~80%
Projected Results			
2000	2001	2002	2003
85%	90%	93%	95%

**Program Results and Effect:**

The Healthy Connections program began in 1993 and rapidly grew until 1996. Today the program operates in 39 of Idaho's 44 counties and enrollment levels of both clients and providers has stabilized. Program staff are renewing efforts to recruit additional primary care physicians in urban areas with low provider participation levels. The program remains cost-effective over the fee-for-service environment.

The new MMIS system underwent a successful pilot program in November and December of 1997 with implementation occurring 12/29/97. The system received the required federal certification in December of 1998 with no conditions.

Safe and effective care has become a major issue in all health care settings. In the long-term care industry 24 critical care indicators have been developed and went into effect in July. Facilities are required to provide the state with quarterly reports on each resident's condition. Facilities that have incidents of falls, broken hips, pressure sores and weight loss higher than state norms are targeted for survey. In the residential care industry, a law has been passed that required all individuals providing care commercially to meet adult foster care standards if they provide care to two or less individuals and to meet the residential care standards if they provide care to three or more individuals. These new regulations that went into effect on July 1, 1999 will now apply to Adult Foster Care Homes, Personal Care Service Homes, Specialized Family Homes, and Residential Care Facilities. We will be providing extensive training in all seven regions during September and October and will be gathering base line data during the coming year. A decision will be made once we have the data to determine future goals and expectations for the industry.

For more information contact Richard Dohner at 334-6652.

## Health & Welfare, Department of Children's Services

### Description:

The Family and Children's Services program is responsible for a variety of programs with the goal of improving the safety, permanency and well-being of children. Child protection safety and risk assessments are conducted by licensed social workers in conjunction with members of local Multidisciplinary child abuse and neglect teams. Services are provided, depending on the severity of the abuse and/or neglect and the age of the child, to families who are experiencing child abuse and neglect on a voluntary basis, under in-home court supervision or when children have been removed from the home. The Department provides foster care services to children in the state's custody who have been abused, neglected, or are seriously emotionally disturbed. Many of these children present unique challenges for foster parents around school, community, and family relationship issues. Foster parents are the most significant resource for the permanent placement of children. Family and Children's provides adoption services for children with special needs who are in the guardianship of the Department. Adoption assistance in the form of monthly subsidies and medical assistance is available for many children with special needs. Public mental health services for children, youth and their families are provided through Family and Children's Services. The Department provides outpatient therapeutic services and support services in addition to residential and inpatient services.

### Major Functions and Targeted Performance Standard(s) for Each Function:

1. Strengthen the ability of families and communities to protect, care for and improve the safety, health and well-being of children.

- A. Decrease the length of stay for children who are participating in alternate care programs.

Actual Results			
1996	1997	1998	1999
			16.04 mos.
Projected Results			
2000	2001	2002	2003
15 mos.	15 mos.	12 mos.	12 mos.

- B. Decrease the number of children who are placed in alternative care placements more than once.

Actual Results			
1996	1997	1998	1999
			1.44
Projected Results			
2000	2001	2002	2003
1.40	1.30	1.25	1.25

- C. Decrease the proportion of multiple referrals among families that are the subject of child abuse referrals.

Actual Results			
1996	1997	1998	1999
			4.43%
Projected Results			
2000	2001	2002	2003
4%	4%	3%	3%

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**Health & Welfare, Department of  
Children's Services**

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- D. Decrease the length of time between the time a parent's rights have been terminated and their child's (pre) adoption placement.

Actual Results			
1996	1997	1998	1999
			16.65 mos.
Projected Results			
2000	2001	2002	2003
14 mos.	12 mos.	10 mos.	9 mos.

**Program Results and Effect:**

Children's Services, at the local level, provides child protection and children's mental health services to children and families where risk factors make the child's living at home not sufficiently safe. Adoption services are provided for special needs children whose parents have had their parental rights terminated and are in the Department's guardianship. Idaho's citizens benefit from these protection and treatment services, and children are able to live in permanent and safe family homes. Prevention and early intervention services provide strategies to reduce safety risk to children and reduce the need to remove children from their homes.

For more information contact Richard Dohner at 334-6652.

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## Health & Welfare, Department of Veterans Services

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### Description:

Veterans Services has the responsibility, on behalf of the State, to provide care and extend financial assistance to disabled and destitute Idaho wartime veterans and their dependents. Services provided include: managing and operating the State's Veterans Homes which include 268 nursing care, 36 residential care, and 10 domiciliary beds; maintaining Veterans Service Offices to assist veterans and their families in obtaining federal benefits to which they are entitled (these offices are located at 805 W. Franklin St., Boise, in space furnished by the Department of Veterans Affairs, and in each Veterans Home); and extending emergency financial assistance to disabled or destitute veterans and their families.

### Major Functions and Targeted Performance Standard(s) for Each Function:

1. Use limited resources wisely.
  - A. Increase the number of individuals who report that their participation in Department initiatives is worthwhile. (All data is accumulated on a Department wide basis. See Indirect Support Services for measurement data.)

Actual Results			
1996	1997	1998	1999
Projected Results			
2000	2001	2002	2003

- - B. Increase the number of Departmental Organizational Units which have developed performance measures related to each of the five goals in the Strategic Plan.. (All data is accumulated on a Department wide basis. See Indirect Support Services for measurement data.)

Actual Results			
1996	1997	1998	1999
Projected Results			
2000	2001	2002	2003

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  - C. Increase the number of Department of Health and Welfare staff for whom there is a skill development plan agreed upon by the employee and his/her supervisor. (All data is accumulated on a Department wide basis. See Indirect Support Services for measurement data.)

Actual Results			
1996	1997	1998	1999
Projected Results			
2000	2001	2002	2003

### Program Results and Effect:

During fiscal year 1999 the Division of Veterans Services provided care to an average of 264 nursing care residents at an average daily cost of \$118.07, and 43 residential care/domiciliary residents at an average daily cost of \$46.82.

For more information contact Richard Dohner at 334-6652.



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## Health & Welfare, Department of Indirect Support Services

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### Description:

This program provides the central administrative functions for the Department. The Office of the Director provides central policy direction for the agency; the Office of Legal Services provides legal advice, monitoring, and litigation services; the Bureau of Financial Services manages the budget process including preparation, allocation and expenditure monitoring and control, manages the cash balance including federal funds and indirect cost allocation, controls FISCAL operations, is responsible for statewide financial planning and necessary support documents for the Department, accounting, purchasing, contract review, payroll and employee records; the Bureau of Management Review is responsible for conducting program operation review, internal control review, central receipting including Child Support payments, motor pool operations, criminal history checks, inventory control, forms control and distribution, and clerical support for the Division of Management Services; the Bureau of Facilities Management coordinates and manages physical plant and facilities needs for all department programs and staff, arranges for preventive maintenance on the Department's state-owned facilities, and coordinates construction and remodeling projects with the Department of Public Works. The Bureau of Human Resources is responsible for position management, recruiting, performance evaluation, equal employment and affirmative action, policy development and personnel management problem solving. The Division of Information Systems helps plan, develop and operate all data processing within the Department. Regional directors serve as the Department's liaison to the communities and are responsible for day-to-day operations such as negotiated leases, service of motor pool vehicles, payment of bills, personnel management, and word processing.

### Major Functions and Targeted Performance Standard(s) for Each Function:

1. Use limited resources wisely.

- A. Increase the number of individuals who report that their participation in Department initiatives is worthwhile.

Actual Results			
1996	1997	1998	1999
			85.69%
Projected Results			
2000	2001	2002	2003
90%	95%	100%	100%

- B. Increase the number of Departmental Organizational Units which have developed performance measures related to each of the five goals in the Strategic Plan.

Actual Results			
1996	1997	1998	1999
			100%
Projected Results			
2000	2001	2002	2003
100%	100%	100%	100%

- C. Increase the number of Department of Health and Welfare staff for whom there is a skill development plan agreed upon by the employee and his/her supervisor.

Actual Results			
1996	1997	1998	1999
			62.59%
Projected Results			
2000	2001	2002	2003
90%	95%	100%	100%

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## **Health & Welfare, Department of Indirect Support Services**

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### **Program Results and Effect:**

This program provides the central administrative structure and support for the Department of Health and Welfare. The support activities provided makes it possible for the rest of the Department's programs to deliver services to the citizens of Idaho.

For more information contact Richard Dohner at 334-6652.

**Description:**

PROGRAM DESCRIPTION: In Mental Health Services, the State of Idaho is committed to a community-based, consumer-guided and organized system of care for its adult citizens experiencing serious mental illness, utilizing state of the art approaches to care and treatment that are proven to be effective and cost efficient. Currently, services are delivered primarily through seven regional, state-operated community mental health centers. State Hospital North and State Hospital South provide both short and long term 24-hour inpatient care and treatment for consumers who are not able to remain safely in the community setting. In Substance Abuse Services, all direct treatment services are provided through contracts with private providers. These direct services include detoxification, residential and outpatient treatment. Prevention is also an important part of the program's responsibility, and is delivered through contracts that include community and parent education, school-based programs for both students and teachers, and intervention with high-risk youth. Tobacco enforcement is provided through a contract with FDA and local law enforcement agencies.

**Major Functions and Targeted Performance Standard(s) for Each Function:**

1. Strengthen the self-reliance of individuals and families.
  - A. Increase the percentage of persons with mental illness receiving Departmental services who participate in community supported employment.

Actual Results			
1996	1997	1998	1999
			3.74%
Projected Results			
2000	2001	2002	2003
10%	15%	15%	15%

**Program Results and Effect:**

1. Medicaid rehab option is now available for participation by private sector providers in all regions.
2. Idaho Community Support Project funded by the Center for Mental Health Services to increase empowerment and self-determination of consumers and family members.
3. Training on all amendments to mental health law completed in all regions to citizens, providers, local law enforcement, consumers and communities.
4. State substance Abuse Executive Council is fully functional as well as seven regional substance abuse authorities to privatize and determine units of service in all substance abuse contracts.

For more information contact Richard Dohner at 334-6652.

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## Health & Welfare, Department of Developmental Disabilities Services

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### Description:

The Idaho Developmental Disabilities Services Act authorizes the Department of Health and Welfare to assume the leadership role for planning and arranging community services for children and adults with developmental disabilities; that is, persons who are developmentally disabled prior to age 22 due to environmental, genetic or health factors. Identification, screening and eligibility determination are key responsibilities of the seven Regional Developmental Disability programs. Services such as therapy, housing, employment, service coordination, and respite care are contracted to numerous private providers. The Regional programs provide monitoring and quality assurance to determine that the consumer has an opportunity for informed choice and that services are implemented in a safe, cost effective and efficient manner. The Idaho State School and Hospital provides 24-hour residential care and treatment on a short or long term basis to the most severely impaired consumers who cannot remain in the community. Also, included in this program are infant toddler and preschool services under federal law and interagency agreement with the Department of Education.

### Major Functions and Targeted Performance Standard(s) for Each Function:

1. Strengthen the self-reliance of individuals and families.
  - A. Increase the percentage of persons with developmental disabilities who are receiving community supported employment.

Actual Results			
1996	1997	1998	1999
			46.17%
Projected Results			
2000	2001	2002	2003
50%	50%	505	50%

### Program Results and Effect:

- > 415 adults were served on HCBS waivers.
- > 55 residents were moved from ISSH to HCBS wavered services.
- > 1,424 infants received early intervention services.

For more information contact Richard Dohner at 334-6652.